REVISED 11/2018

THIS FORM MAY BE REPRODUCED

	FORM	REPORT OF CAMPAIGN CONT CHECK APPROPRIATE BOXES—PI Quarterly Report: (Check one:)	TRIBUTIONS AND EXPENDITURES LEASE TYPE OR PRINT IN BLACK INK 2 nd 3rd 4th	FOR OFFICE USE ONLY E 80AR9 OF ELECTIONS CHARGO OFFICE
	D-2	Final Report (Fund balance		1 JUL 15 PM 3: 48
		Amendment of the Repo	ort Indicated Above	
Full name and complete mailing address of Political Committee:			CHECK FOR ADDRESS CHANGE	COMMITTEE ID #
Our Revolution IL				Committee ID: 35629
c/o Alison Squires 100 Terry Dr				
Sugar Grove, IL 60554-5428				
E-mail address: CHECK FOR E-MAIL ADDRESS CHANGE				
REPORTING P	OF REP	AVAILABLE AT BEGINNING PORTING PERIOD: 9 (3 98) this amount in Section D, Line (A)	ALL POLITICAL COMMITTE STATE BOARD OF ELECTIONS 2329 S MacARTHUR BLVD OR SPRINGFIELD, IL 62704-4503	ES RETURN TO: STATE BOARD OF ELECTIONS JAMES R THOMPSON CENTER 100 W RANDOLPH, STE 14-100 CHICAGO, IL 60501-3292
SECTION A — RECEIPTS			SECTION B — EXPENDITURES	
Individual Contributions a. Itemized (from Schedule A): \$(1a)			6. Transfers Out a. Itemized (from Schedule B):	\$(6a)
b. Not-Itemized: \$(1b)			b. Not-Itemized:	\$(6b)
2. Transfers in			7. Loans Made	A 19_1
a. Itemized (from Schedule A): \$(2a) b. Not-Itemized; \$(2b)			a. Itemized (from Schedule B): b. Not-Itemized:	\$(7a) \$(7b)
3. Loans Received			8. Expenditures	, , , , , ,
a. Itemized (from Schedule A): \$(3a)			a. Itemized (from Schedule B):	\$(8a)
b. Not-itemized \$(3b)			b. Not-Itemized	\$(8b)
4. Other Receipts a. Itemized (from Schedule A): \$(4a)			9. Independent Expenditures a. Itemized (from Schedule B-9)); \$(9a)
b. Not-itemized \$(4b)			b. Not-Itemized	\$(9b)
TOTAL RECEIPTS (1a thru 4b) \$(TR)			TOTAL EXPENDITURES (6a thru	9b)\$(TE)
5. In-Kind Contributions			SECTION C — DEBTS AND OBLIGATIONS (include previously reported unpaid debts)	
a. Itemized (from Schedule I): \$(5a)			10. a. Itemized (from Schedule C):	\$(10a)
b. Not-Itemized \$(5b)			b. Not-Itemized	\$(10b)
TOTAL IN-KIND (5a + 5b) \$ (Ti)			TOTAL DEBTS & OBLIGATIONS \$	
Name and address of person submitting this report <u>if other</u> than the committee's Chair or Treasurer:			Cash available at beginning or reporting period	f s 213 28 (A)
	•	·	Total Receipts from Section A (TR	
			Total cash (A) plus (B): \$ <u>Q</u> (C)
			Total Expenditures from Section 8 (TE): \$(D)
			Funds available at close o reporting period (C minus D)	
·			investments total (if applicable	,
VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) RAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.				
SIGNATURE OF COMMITTEE TREASURER OR CANDIDATE QQ DATE				

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